

# THE CITY OF MIDLAND, TEXAS

OFFICE OF THE  
PURCHASING AGENT

(432) 685-7234  
FAX (432) 685-0523  
POST OFFICE BOX 1152  
MIDLAND, TX 79702-1152

## RE: VENDOR REGISTRATION QUESTIONNAIRE

The City of Midland registers all prospective bidders in a computerized vendor cataloging system. The information that goes into this system is utilized to assist our purchasing personnel in locating specific bidders for specific commodities and equipment that are to be purchased by the City of Midland.

By registering your company into the system you will have a better chance of being included for receipt of bid requests and requests for proposals since we use the system as a source reference library. For this reason, we request that you complete the enclosed Vendor Registration questionnaire. If you want to sell to the City, it is imperative that you complete this form no matter how much business you've done with the City in the past. It is your responsibility to insure that you get on the City's vendor list.

Review the enclosed list of commodities and determine the categories which best describe the items which you wish to sell to the City. Enter the five digit codes (other than those that end in 00 or 99) in the specified area of the form. We realize these are very generalized categories and your firm provides many specific items within each category. You may provide a detailed listing of those items on a separate document if you so desire.

Request for Bids, Purchase Orders and Payments will be generated solely by the computerized system. Therefore, it is equally important that you keep us informed in writing of any changes in the attached information as they occur.

Please complete and return the registration form as soon as possible to receive consideration. If you have any questions regarding the form, feel free to call the Purchasing Division at 432-685-7234.

Eddie Price, C.P.M.  
Purchasing Agent

A. Type or print all entries.	<div>City Of Midland</div> <div>Vendor Questionnaire</div>	FOR PURCHASING USE ONLY	
B. Insert N/A in all spaces not		Add	Vendor #
C. List all commodities your firm supply		Update	Date
Company's Complete		Federal ID or SS	
Bid or Quotation Mailing Address:		City:	ST: Zip :
Representative:		Telephone#	Fax#
E-Mail Address:		Wed Address:	
IF YOU ARE A MINORITY BUSINESS ENTERPRISE * PLEASE CHECK THE BOX THAT APPLIES:		Asian American <input type="checkbox"/>	Alaskan Aleut <input type="checkbox"/> Black <input type="checkbox"/>
		Native American <input type="checkbox"/>	Pacific islander <input type="checkbox"/> Hispanic <input type="checkbox"/>
		Protected groups <input type="checkbox"/>	Women <input type="checkbox"/> Handicapped <input type="checkbox"/>
*DEFINITION OF A MINORITY BUSINESS ENTERPRISE:Any business enterprise in which 51% or more of the financial interest is by a member of a minority group, e.g. Asian American, Native American, Alaskan Aleut, Black, Hispanic, Pacific Islander, or a protected group: Women or Handicapped.			
ARE ANY OFFICERS OR STOCKHOLDERS OR EMPLOYEES, COUNCILORS OR OFFICERS OF THE CITY OF MIDLAND? YESG NOG			
TYPE OF ORGANIZATION (Check One)			
Individual: <input type="checkbox"/> Partnership <input type="checkbox"/> Non-Profit Organization: <input type="checkbox"/> 1099 required: Yes <input type="checkbox"/> No: <input type="checkbox"/> How long in present business? Yrs.			
<input type="checkbox"/> Number of employees? <input type="checkbox"/> Corporation, incorporated under the laws of the state of:			
NAMES OF OFFICERS, OWNERS OR PARTNERS			
President:		Vice President: Secretary:	
Treasurer:		Owners or Partners:	
AFFILIATES OF THE APPLICANT (Names, Locations, and nature of affiliation)			
Signature: Name and Title of person signing (Please print or type):			

## COMMODITY CLASSIFICATIONS

Which commodity classification(s) best describe the Commodity/Service your Company deals in.  
(See the attached listing)

COMPANY NAME \_\_\_\_\_

[illegible]